Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF NEW YORK	<u> </u>	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar licer Brin iden	e the name that is on a government-issued ure identification (for mple, your driver's ase or passport). g your picture tification to your eting with the trustee.	Jonathan First name Michael Middle name Gabbard Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ude your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-4021	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	229 Sparling Drive Rochester, NY 14616	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Monroe				
		County	County			
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Deb	otor 1 Jonathan Michael	Gabbard			Case number (if known)	
Par	t 2: Tell the Court About	our Bankrup	tcy Case			
7.	The chapter of the Bankruptcy Code you are choosing to file under			ion of each, see <i>Notice Requir</i> o of page 1 and check the app	ed by 11 U.S.C. § 342(b) for Individuals Fropriate box.	iling for Bankruptcy
	oncoming to the under	■ Chapter 7	7			
		☐ Chapter 1	11			
		☐ Chapter 1	12			
		☐ Chapter 1	13			
8.	How you will pay the fee	about l order.	now you may pay.	Typically, if you are paying the	e check with the clerk's office in your local fee yourself, you may pay with cash, casl ur behalf, your attorney may pay with a cre	hier's check, or money
				nstallments. If you choose thie	s option, sign and attach the Application t	or Individuals to Pay
			0	,	option only if you are filing for Chapter 7.	. By law, a judge may,
		but is r applies	not required to, wait to your family size	ve your fee, and may do so on and you are unable to pay the	ly if your income is less than 150% of the efee in installments). If you choose this of (Official Form 103B) and file it with your	official poverty line that ption, you must fill out
9.	Have you filed for	■ No.				
	bankruptcy within the last 8 years?	☐ Yes.				
	,		istrict	When	Case number	
			istrict	When	Case number	
		D	istrict	When	Case number	
10.	Are any bankruptcy cases pending or being	■ No				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.				
		D	ebtor		Relationship to you	
		D	istrict	When	Case number, if know	n
		D	ebtor		Relationship to you	
		D	istrict	When	Case number, if know	n
11.	Do you rent your	■ No.	Go to line 12.			
	residence?		Has your landlord o	obtained an eviction judgment	against you?	
			☐ No. Go to lii	, ,	-	
				: Initial Statement About an Ev	iction Judgment Against You (Form 101A)) and file it as part of
				otcy petition.	, , , ,	·

Deb	tor 1 Jonathan Michael	Gabbard	i		Case number (if known)
Par	Report About Any Bu	sinesses	You Owr	as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	No. Go to Part 4.		
		☐ Yes.	Yes. Name and location of business		
	A sole proprietorship is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, Sta	te & ZIP Code
	it to this petition.		Chec		ox to describe your business:
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	e
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadline	s. If you ir is, cash-f	ndicate that you are low statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
ć	For a definition of small	■ No.	I am i	not filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code	•	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	4: Report if You Own or	Have Any	Hazardo	ous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is	the hazard?	
	identifiable hazard to public health or safety? Or do you own any		If immed	diate attention is	
	property that needs immediate attention?			why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	
					Number, Street, City, State & Zip Code

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credi
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Jonathan Michael	Gabbard		Case number	(if known)	
Par	t 6: Answer These Questi	ons for Rep	porting Purposes			
16.	What kind of debts do you have?				ned in 11 U.S.C. § 101(8) as "incurred by an	
		I	☐ No. Go to line 16b.			
		ı	Yes. Go to line 17.			
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.			
		I	☐ No. Go to line 16c.			
		[☐ Yes. Go to line 17.			
		16c. S	State the type of debts you owe	that are not consumer debts or business	s debts	
17.	Are you filing under Chapter 7?	tuestions for Reporting Purposes 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. Yes. Go to line 17. Are your debts primarily business debts? Business debts are debts that you in money for a business or investment or through the operation of the business or investment or through the operation				
	Do you estimate that after any exempt property is excluded and		■ No □ Yes □ 1,000-5,000 □ 25,001-50,000			
	administrative expenses	ı	No		□ 1,000-5,000 □ 25,001-50,000 □ 50,001-100,000 □ 10,001-25,000 □ More than100,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion	
	are paid that funds will be available for distribution to unsecured creditors?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) a individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17.				
18.	How many Creditors do ■ 1-40			□ 1.000-5.000	□ 25.001-50.000	
	you estimate that you owe?					
	owe:			☐ 10,001-25,000	☐ More than100,000	
19.	How much do you	\$0 - \$50	0,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion	
	estimate your assets to be worth?					
					☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	
20.	How much do you	□ \$0 - \$50	0,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion	
	estimate your liabilities to be?				\$1,000,000,001 - \$10 billion	
					☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion	
Par	t 7: Sign Below					
For	you	I have exa	mined this petition, and I declar	e under penalty of perjury that the inform	nation provided is true and correct.	
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request re	elief in accordance with the cha	pter of title 11, United States Code, spec	ified in this petition.	
		bankruptcy and 3571.	case can result in fines up to \$			
		Jonathan	Michael Gabbard	Signature of Debtor	2	
		Executed of			/DD / VVVV	
			IVIIVI / UU / YYYY	MM	/ טט / ۲۲۲۲	

Debtor 1	Jonathan Michael Gabbard	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Michael A. Furlano	Date	December 18, 2019	
Signature of Attorney for Debtor		MM / DD / YYYY	
Michael A. Furlano			
Printed name			
Legal Aid Society			
Firm name			
1 West Main Street			
Suite 800			
Rochester, NY 14614			
Number, Street, City, State & ZIP Code			
Contact phone (585) 232-4090	Email address		
5248190 NY			
Bar number & State			

Fill	in this informa	ation to identify your	case:			
Deb	otor 1	Jonathan Michae	Gabbard			
D-1		First Name	Middle Name	Last Name		
1 -	otor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ted States Banl	kruptcy Court for the:	WESTERN DISTRICT (OF NEW YORK		
Cas	e number					
(if kn					_	k if this is an ded filing
Of	ficial For	m 106Sum				
Su	mmary of	Your Assets a	and Liabilities ar	nd Certain Statistical Information		12/15
info	mation. Fill or original form	ut all of your schedule	es first; then complete th	e are filing together, both are equally responsible for the information on this form. If you are filing amended the box at the top of this page.		
					Your a	ssets of what you own
1.	Schedule A/I 1a. Copy line	3: Property (Official Fo 55, Total real estate, for	orm 106A/B) com Schedule A/B		\$	0.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B		\$	3,505.00
	1c. Copy line	63, Total of all property	on Schedule A/B		\$	3,505.00
Par	2: Summa	rize Your Liabilities				
						iabilities It you owe
2.			aims Secured by Property nn A, Amount of claim, at	v (Official Form 106D) the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.			<i>Unsecured Claims</i> (Officia 1 (priority unsecured claim	al Form 106E/F) ns) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured c	claims) from line 6j of Schedule E/F	\$	189,599.00
				Your total liabilities	\$	189,599.00
Par	3: Summa	rize Your Income and	Expenses			
4.		our Income (Official Formbined monthly incom		ə /	\$	3,385.82
5.		our Expenses (Official onthly expenses from li			\$	3,688.84
Par	4: Answer	These Questions for	Administrative and Stati	istical Records		
6.	-	• • •	er Chapters 7, 11, or 13? on this part of the form. C	Check this box and submit this form to the court with you	ur other sc	hedules.
7.	■ Yes What kind of	debt do you have?				
				debts are those "incurred by an individual primarily for 9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

1,297.10

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	143,881.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	19,661.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	163,542.00

Fill in this infor	mation to identify yo	ur case and this filing:			
Debtor 1	Jonathan Mich	ael Gabbard Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
		: WESTERN DISTRICT OF			
	and aproprogramme				
Case number _					Check if this is an amended filing
Official Fo	rm 106A/B				
<u>Schedul</u>	e A/B: Pro	perty			12/15
think it fits best. B information. If mor Answer every ques	Be as complete and acc re space is needed, atta stion.	urate as possible. If two married	ice. If an asset fits in more than one category if people are filing together, both are equally re. On the top of any additional pages, write you You Own or Have an Interest In	sponsible for suppl	ying correct
1. Do you own or l	have any legal or equita	able interest in any residence, b	uilding, land, or similar property?		
■ No. Go to Par	rt 2.				
☐ Yes. Where i					
Part 2: Describe	Your Vehicles				
			icles, whether they are registered or not le G: Executory Contracts and Unexpired Le		cles you own that
3. Cars, vans, tr	ucks, tractors, sport	utility vehicles, motorcycles	s		
■ No					
☐ Yes					
4. Watercraft, ai Examples: Boa ■ No	rcraft, motor homes ats, trailers, motors, pe	ATVs and other recreational watercraft, fishing vess	al vehicles, other vehicles, and accessor sels, snowmobiles, motorcycle accessories	ies	
☐ Yes					
			tries from Part 2, including any entries fo		\$0.00
Port 2. Deceribe	Your Personal and Ho	usahald ltama			
		uitable interest in any of the	following items?	Cui	rent value of the
·		ŕ	ŭ	Do	tion you own? not deduct secured ms or exemptions.
Examples: Ma □ No		s ıre, linens, china, kitchenware			
Yes. Desc	ribe				
			Fools, Washer, Dryer, Vacuum, rden Tools, Patio Table with 5		\$650.00

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1	Jonathan Michael Gabbard	Case number (if known)
	Living Room: Couch, Loveseat, 2 End Tables, 3 Boo Lamps	okcases, 2 \$250.00
	Dining Room: Table, 3 Chairs, Assorted Silverware	\$60.00
	Kitchen: Microwave, Toaster, Assorted Pots/Pans, A Dishware, Assorted Cutlery, Assorted Cooking Uter	
	Bedroom: Bed, Dresser, 3 Chest of Drawers, Night 7	Γable \$150.00
□No	nics les: Televisions and radios; audio, video, stereo, and digital equipment; computers including cell phones, cameras, media players, games Describe	s, printers, scanners; music collections; electronic devices
	40" Flat Screen TV, DVD Player, Stereo, Assorted DV Laptop, Printer, 3 Cell Phones	VDS/CDs, Old \$450.00
Examp	 ibles of value iles: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other collections, memorabilia, collectibles Describe 	other art objects; stamp, coin, or baseball card collections;
Examp	nent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tab musical instruments	oles, golf clubs, skis; canoes and kayaks; carpentry tools;
■ Yes.	Comic Books, Sportscards, Stamp Collection, Coin	Collection \$250.00
■ No □ Yes. 11. Clothe Exam □ No	ples: Pistols, rifles, shotguns, ammunition, and related equipment Describe	
	Pants, Shirts, Shoes, Sweathers, Jackets, T-shirts, a Undergarments	and \$150.00
□ No	ry sples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloc Describe	om jewelry, watches, gems, gold, silver
	Necklace Wedding Band and Watch	\$500.00

Official Form 106A/B Schedule A/B: Property page 2

D	י וטוטד	Jonaman	Wilchael G	apparu			ise number (ii known)	-
13.		m animals les: Dogs, cat	ts, birds, ho	ses				
	■ No □ Yes. [Describe						
			and house	nold items you	ı did not a	ready list, including any health aid	ls you did not list	
	■ No	Give specific	information					
	□ 163. V	orve specific	imormation					
15						including any entries for pages yo	u have attached	\$2,490.00
		cribe Your Fin						
Do) you owr	n or have an	y legal or e	quitable intere	est in any o	of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No			-		n a safe deposit box, and on hand wh	en you file your petiti	on
	– res						Cash	\$5.00
_							Casii	
	□ No		ns. If you ha			certificates of deposit; shares in cred the same institution, list each. Institution name:	lit unions, brokerage l	houses, and other similar
			17.1.	Savings		ESL Federal Credit Union		\$10.00
				Prepaid Re	loadable			
_			17.2.	Card		Green Dot Bank		\$0.00
18.		es: Bond fund		ely traded stocent accounts wi	th brokeraç	ge firms, money market accounts		
19.	joint ve		l stock and	interests in in	corporated	d and unincorporated businesses,	including an interes	et in an LLC, partnership, and
	■ No □ Yes. 0	Give specific		about them ne of entity:		9,	% of ownership:	
20.	Negotia Non-neg	ble instrume	nts include p	ersonal checks	s, cashiers'	e and non-negotiable instruments checks, promissory notes, and mone to someone by signing or delivering		
	■ No □ Yes. G	Give specific i		about them uer name:				
	Example ■ No		in IRA, ERIS	SA, Keogh, 401	(k), 403(b)	, thrift savings accounts, or other pen	sion or profit-sharing	plans
	☐ Yes. L	ist each acco		ely. of account:		Institution name:		

Official Form 106A/B Schedule A/B: Property page 3

De	ebtor 1 Jonathan Michael	Gabbard	C	ase number (if known)	
22.	Examples: Agreements with la	rments sits you have made so that you ma ndlords, prepaid rent, public utilitie			r others
	■ No □ Yes	Institu	ition name or individual:		
23.	. Annuities (A contract for a per	iodic payment of money to you, eitl	ner for life or for a number of y	/ears)	
	■ No □ Yes Issuer na	me and description.			
24.	. Interests in an education IRA, 26 U.S.C. §§ 530(b)(1), 529A(b	in an account in a qualified ABL), and 529(b)(1).	E program, or under a qual	ified state tuition program	
	■ No □ YesInstitution	n name and description. Separately	file the records of any interes	sts.11 U.S.C. § 521(c):	
25.	. Trusts, equitable or future int	erests in property (other than ar	ything listed in line 1), and	rights or powers exercisa	ble for your benefit
	☐ Yes. Give specific information	n about them			
26.	Examples: Internet domain na	rks, trade secrets, and other inte mes, websites, proceeds from roya		s	
	No☐ Yes. Give specific information	n about them			
	■ No	cclusive licenses, cooperative asso	ciation holdings, liquor licens	es, professional licenses	
	Yes. Give specific information				0
IVI	loney or property owed to you?			1	Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	. Tax refunds owed to you No Yes Give specific information	n about them, including whether yo	u already filed the returns any	the tay years	
	— Tes. Give specific information	rabout them, including whether yo	u alleady liled the returns and	Tille tax years	
		2019 Expected Tax	Refund	Federal	\$500.00
		ZOTO EXPOSICO TUX		I ederal	
		2019 Tax Refund		State	\$500.00
29.	Family support Examples: Past due or lump so No ☐ Yes. Give specific information	um alimony, spousal support, child	support, maintenance, divorc	e settlement, property settle	ment
30.		es you ability insurance payments, disabilit ans you made to someone else	y benefits, sick pay, vacation	pay, workers' compensation	n, Social Security
	■ No□ Yes. Give specific information	n			
31.	. Interests in insurance policie Examples: Health, disability, o	s r life insurance; health savings acc	ount (HSA); credit, homeowne	er's, or renter's insurance	
	☐ Yes. Name the insurance cor	npany of each policy and list its va ompany name:	lue. Beneficiary	r:	Surrender or refund

Schedule A/B: Property page 4 Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com Case 2-19-21248-PRW,

Official Form 106A/B

Debtor 1	Jonathan Michael Gabbard	Case number (if known)	
			value:
If you a someo	erest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance poine has died. Give specific information	licy, or are currently entitled to rec	eive property because
Examp ■ No	against third parties, whether or not you have filed a lawsuit or made les: Accidents, employment disputes, insurance claims, or rights to sue Describe each claim	a demand for payment	
34. Other o	ontingent and unliquidated claims of every nature, including counterc	laims of the debtor and rights to	set off claims
■ No □ Yes.	Describe each claim		
-	ancial assets you did not already list		
■ No □ Yes.	Give specific information		
	he dollar value of all of your entries from Part 4, including any entries rt 4. Write that number here		\$1,015.00
Part 5: Des	scribe Any Business-Related Property You Own or Have an Interest In. List any I	eal estate in Part 1.	
37. Do you o	own or have any legal or equitable interest in any business-related property?		
No. Go	to Part 6.		
☐ Yes. G	o to line 38.		
	scribe Any Farm- and Commercial Fishing-Related Property You Own or Have an ou own or have an interest in farmland, list it in Part 1.	Interest In.	
	own or have any legal or equitable interest in any farm- or commercia	I fishing-related property?	
_	Go to Part 7.		
☐ Yes.	Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not List Ak	oove	
	have other property of any kind you did not already list? les: Season tickets, country club membership		
☐ Yes.	Give specific information		
54. Add t	he dollar value of all of your entries from Part 7. Write that number her	e	\$0.00

Deb	tor 1 Jonathan Michael Gabbard	Jonathan Michael Gabbard			
Part	8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2			\$0.00	
56.	Part 2: Total vehicles, line 5	\$0.00			
57.	Part 3: Total personal and household items, line 15	\$2,490.00			
58.	Part 4: Total financial assets, line 36	\$1,015.00			
59.	Part 5: Total business-related property, line 45	\$0.00			
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00			
61.	Part 7: Total other property not listed, line 54 +	\$0.00			
62.	Total personal property. Add lines 56 through 61	\$3,505.00	Copy personal property total	\$3,505.00	
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$3,505.00	

Fill in this infor	mation to identify your	case:		
Debtor 1	Jonathan Michae	l Gabbard		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	OF NEW YORK	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

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	_		

Port 1. Identify the Preparty Vey Claim as Exempt

1.	Which set of exemptions are you claiming? Check one only, even it your spouse is filing with you.								
	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)					
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.					
	Misc: Various Hand and Power Tools, Washer, Dryer, Vacuum,	\$650.00		\$650.00	11 U.S.C. § 522(d)(3)				
	Luggage, A/C Unit, Assorted Garden Tools, Patio Table with 5 Chairs Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit					
	Living Room: Couch, Loveseat, 2	\$250.00		\$250.00	11 U.S.C. § 522(d)(3)				
	End Tables, 3 Bookcases, 2 Lamps Line from Schedule A/B: 6.2			100% of fair market value, up to any applicable statutory limit					
	Dining Room: Table, 3 Chairs, Assorted Silverware	\$60.00		\$60.00	11 U.S.C. § 522(d)(3)				
	Line from Schedule A/B: 6.3			100% of fair market value, up to any applicable statutory limit					
	Kitchen: Microwave, Toaster, Assorted Pots/Pans, Assorted	\$30.00		\$30.00	11 U.S.C. § 522(d)(3)				
	Dishware, Assorted Cutlery, Assorted Cooking Utensils Line from Schedule A/B: 6.4			100% of fair market value, up to any applicable statutory limit					
	Bedroom: Bed, Dresser, 3 Chest of Drawers, Night Table	\$150.00		\$150.00	11 U.S.C. § 522(d)(3)				
	Line from Schedule A/B: 6.5			100% of fair market value, up to any applicable statutory limit					

Debto	Jonathan Michael Gabbard			Case number (if known)	
Bi	rief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	0" Flat Screen TV, DVD Player, tereo, Assorted DVDS/CDs, Old	\$450.00		\$450.00	11 U.S.C. § 522(d)(3)
L	aptop, Printer, 3 Cell Phones ine from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
	omic Books, Sportscards, Stamp	\$250.00		\$250.00	11 U.S.C. § 522(d)(5)
	ine from <i>Schedule A/B</i> : 9.1			100% of fair market value, up to any applicable statutory limit	
	ants, Shirts, Shoes, Sweathers, ackets, T-shirts, and	\$150.00		\$150.00	11 U.S.C. § 522(d)(3)
U	Indergarments ine from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
	ecklace, Wedding Band, and Watch	\$500.00		\$500.00	11 U.S.C. § 522(d)(4)
	Tendin delinedate 702. 1211			100% of fair market value, up to any applicable statutory limit	
_	ash ine from Schedule A/B: 16.1	\$5.00	•	\$5.00	11 U.S.C. § 522(d)(5)
	The Hoth deficedate ALD. 1911			100% of fair market value, up to any applicable statutory limit	
	avings: ESL Federal Credit Union	\$10.00		\$10.00	11 U.S.C. § 522(d)(5)
	The Hoth Confedure 7V Z. TTT			100% of fair market value, up to any applicable statutory limit	
	repaid Reloadable Card: Green Dot	\$0.00		\$10.00	11 U.S.C. § 522(d)(5)
_	ine from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	ederal: 2019 Expected Tax Refund	\$500.00		\$500.00	11 U.S.C. § 522(d)(5)
	The Hoth deficedate AVD. 2011			100% of fair market value, up to any applicable statutory limit	
_	tate: 2019 Tax Refund	\$500.00		\$500.00	11 U.S.C. § 522(d)(5)
	The Hoth Golficoure 70 D. 2012			100% of fair market value, up to any applicable statutory limit	
	re you claiming a homestead exemption of Subject to adjustment on 4/01/22 and every 3			led on or after the date of adjustmer	ıt.)
	_	ed by the exemption wi	thin 1	,215 days before you filed this case	?
	□ No □ Yes				

Fill in this information to identify your case:						
Debtor 1 Jonathan Michael Gabbard						
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		WESTERN DISTRICT (OF NEW YORK			
Case number						
(if known)						Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

Fill in t	this information to identify your o	ase:				
Debtor						
	First Name	Middle Name	Last Name		_	
Debtor (Spouse i		Middle Name	Last Name			
United	States Bankruptcy Court for the:	WESTERN DISTRIC	CT OF NEW YORK			
Case n	umber					
(if known)						Check if this is an
						amended filing
Offici	al Form 106E/F					
	edule E/F: Creditors W	ho Have Unse	ecured Claims			12/15
	omplete and accurate as possible. Us			Part 2 for creditors w	ith NONPRIORITY cla	
eft. Atta	e D: Creditors Who Have Claims Sector the Continuation Page to this paged case number (if known). List All of Your PRIORITY Un	e. If you have no inform				
1. Do	any creditors have priority unsecure	d claims against you?				
	No. Go to Part 2.					
	Yes.					
Dowt 2	List All of Vour NONDDIODIT	V Unaccured Claima				
Part 2:	List All of Your NONPRIORIT any creditors have nonpriority unsec					
_	No. You have nothing to report in this pa	• •		andulan		
	Yes.	art. Submit this form to th	e court with your other scr	ledules.		
uns	t all of your nonpriority unsecured cla ecured claim, list the creditor separately n one creditor holds a particular claim, li	for each claim. For each	claim listed, identify what	type of claim it is. Do no	ot list claims already in	cluded in Part 1. If more
Fai	12.					Total claim
4.1	AT&T Wireless	Last 4 d	igits of account number			\$553.69
	Nonpriority Creditor's Name P.O. Box 537104 Atlanta, GA 30353	When w	as the debt incurred?	10/18		_
	Number Street City State Zip Code	As of th	e date you file, the claim	is: Check all that apply	,	
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Cont	ingent			
	Debtor 2 only	☐ Unlic	uidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disp	uted			
	☐ At least one of the debtors and and		NONPRIORITY unsecure	ed claim:		
	Check if this claim is for a comm	nunity	ent loans			
	debt Is the claim subject to offset?		ations arising out of a sep s priority claims	aration agreement or di	vorce that you did not	
	■ No	<u></u>	s to pension or profit-shari	ing plans, and other sim	ilar debts	
	☐ Yes		r Specify Service			

Debtor	1 Jonathan Michael Gabbard	Case number (if known)				
4.2	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	9834	\$3,838.00		
	Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 09/16 Last Active 5/02/18			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	■ Other. Specify Credit Card	<u> </u>			
4.3	Citibank/Best Buy	Last 4 digits of account number	9053	\$3,079.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 790441	When was the debt incurred?	Opened 11/02 Last Active 6/08/18			
	St. Louis, MO 63179 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	or one or an anal appry			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	■ Other. Specify Charge Acc	count			
4.4	Eos Cca	Last 4 digits of account number	2353	\$65.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 329	When was the debt incurred?	Opened 09/19			
	Norwell, MA 02061 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	□Yes	Collection A Other. Specify Laboratory	Attorney A C M Medical			

Debtor	1 Jonathan Michael Gabbard	Case number (if known)						
4.5	Investors Property Management Nonpriority Creditor's Name	Last 4 digits of account number		\$1,087.35				
	1161 Sonoma Park Drive Suite 400							
	Norman, OK 73071	_						
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.	_						
	Debtor 1 only	Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.					
	At least one of the debtors and another	Student loans	d claim:					
	☐ Check if this claim is for a community debt	_	andian and an aliversa district alideration					
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts					
	□Yes	Other. Specify Rent						
4.6	Kavod Psychotherapy	Last 4 digits of account number		\$240.00				
	Nonpriority Creditor's Name	_		•				
	25 Circle Street Unit 201	When was the debt incurred?						
	Rochester, NY 14607							
	Number Street City State Zip Code							
	Who incurred the debt? Check one.							
	■ Debtor 1 only							
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure						
	☐ Check if this claim is for a community	☐ Student loans						
	debt		aration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims						
	No	Debts to pension or profit-sharing						
	Yes	Other. Specify Counseling	9					
4.7	Kohls/Capital One	Last 4 digits of account number	3221	\$2,023.00				
	Nonpriority Creditor's Name Attn: Credit Administrator Po Box 3043	When was the debt incurred?	Opened 10/07 Last Active 6/08/18					
	Milwaukee, WI 53201	_						
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.	☐ Contingent						
	Debtor 1 only							
	Debtor 2 only	Unliquidated						
	Debtor 1 and Debtor 2 only	Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts					
	Yes							
	□ res	■ Other. Specify Charge Ac						

Debtor	1 Jonathan Michael Gabbard	Case number (if known)					
4.8	Mercantile Adjustment Bureau Nonpriority Creditor's Name	Last 4 digits of account number	6078	\$959.00			
	Attn: Bankruptcy 165 Lawrence Bell Dr Ste 100 Williamsville, NY 14221	When was the debt incurred?	Opened 10/18				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	No	Debts to pension or profit-sharin	a plans, and other similar debts				
	■ No	·					
	☐ Yes	Other. Specify Hospital	Attorney Rochester General				
4.9	OKDHS Nonpriority Creditor's Name	Last 4 digits of account number	7001	\$19,661.00			
	Attn: Bankruptcy Po Box 248822 Oklahoma City, OK 73124	When was the debt incurred?	Opened 5/17/17 Last Active 5/15/18				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify					
		Child Supp	ort				
4.1 0	Rochester Gas & Electric Corp. Nonpriority Creditor's Name	Last 4 digits of account number	3585	\$85.76			
	89 East Avenue Rochester, NY 14649	When was the debt incurred?	02/19				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	\square Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Utilities					

Jonathan Michael Gabbard	Case number (if known)					
Book on the Book of the Miles			405.0			
Rochester Regional Health	Last 4 digits of account number		\$65.2			
Nonpriority Creditor's Name P.O. Box 26290	When was the debt incurred?					
Rochester, NY 14626-0290						
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	□ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
■ No	Debts to pension or profit-sharin	a plane, and other similar debts				
☐ Yes	Other. Specify Medical Se	rvices				
Solomon & Solomon P C	Last 4 digits of account number	9919	\$235.0			
Nonpriority Creditor's Name	_					
Attn: Bankruptcy 1 Columbia Circle	When was the debt incurred?	Opened 09/19				
Albany, NY 12203						
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
Who incurred the debt? Check one.		,				
■ Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Student loans					
☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not				
Is the claim subject to offset?	report as priority claims	ifation agreement of divorce that you did not				
■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
— 140		Attorney Rochester Gas And				
☐ Yes	Other. Specify Electric Co	r				
The University Of Oklahoma	Last A digits of account number	R24A	\$5.325.0			
The University Of Oklahoma Nonpriority Creditor's Name	Last 4 digits of account number	R24A	\$5,325.0			
Nonpriority Creditor's Name 1000 Asp Avenue	Last 4 digits of account number When was the debt incurred?	Page 17/27/19	\$5,325.0			
Nonpriority Creditor's Name 1000 Asp Avenue Norman, OK 73019	When was the debt incurred?	Opened 3/05/15 Last Active 11/27/19	\$5,325.0			
Nonpriority Creditor's Name 1000 Asp Avenue Norman, OK 73019 Number Street City State Zip Code		Opened 3/05/15 Last Active 11/27/19	\$5,325.0			
Nonpriority Creditor's Name 1000 Asp Avenue Norman, OK 73019 Number Street City State Zip Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim i	Opened 3/05/15 Last Active 11/27/19	\$5,325.0			
Nonpriority Creditor's Name 1000 Asp Avenue Norman, OK 73019 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only	When was the debt incurred? As of the date you file, the claim i	Opened 3/05/15 Last Active 11/27/19	\$5,325.0			
Nonpriority Creditor's Name 1000 Asp Avenue Norman, OK 73019 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	When was the debt incurred? As of the date you file, the claim i Contingent Unliquidated	Opened 3/05/15 Last Active 11/27/19	\$5,325.0			
Nonpriority Creditor's Name 1000 Asp Avenue Norman, OK 73019 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	When was the debt incurred? As of the date you file, the claim i Contingent Unliquidated Disputed	Opened 3/05/15 Last Active 11/27/19 s: Check all that apply	\$5,325.0			
Nonpriority Creditor's Name 1000 Asp Avenue Norman, OK 73019 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	When was the debt incurred? As of the date you file, the claim i Contingent Unliquidated Disputed Type of NONPRIORITY unsecured	Opened 3/05/15 Last Active 11/27/19 s: Check all that apply	\$5,325.0			
Nonpriority Creditor's Name 1000 Asp Avenue Norman, OK 73019 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community	When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans	Opened 3/05/15 Last Active 11/27/19 s: Check all that apply	\$5,325.0			
Nonpriority Creditor's Name 1000 Asp Avenue Norman, OK 73019 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans	Opened 3/05/15 Last Active 11/27/19 s: Check all that apply	\$5,325.0			
Nonpriority Creditor's Name 1000 Asp Avenue Norman, OK 73019 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a sepa	Opened 3/05/15 Last Active 11/27/19 s: Check all that apply d claim:	\$5,325.0			

Debtor 1 Jonathan Michael Gabbard		Case number (if known)					
T	SAA Federal Savings Bank npriority Creditor's Name	Last 4 digits of account number	8343	\$12,190.00			
Att 10 Sa	tn: Bankruptcy 750 Mcdermott Freeway In Antonio, TX 78288 Imber Street City State Zip Code	When was the debt incurred? As of the date you file, the claim i	Opened 05/09 Last Active 4/05/18				
	no incurred the debt? Check one.	As of the date you me, the dam'r	3. Officer all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
_	Debtor 1 and Debtor 2 only	☐ Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:				
	Check if this claim is for a community	☐ Student loans					
deb		☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Credit Card	<u> </u>				
, 1	SAA Federal Savings Bank npriority Creditor's Name	Last 4 digits of account number	4765	\$80.00			
Att 10	tn: Bankruptcy 750 Mcdermott Freeway In Antonio, TX 78288	When was the debt incurred?	Opened 10/17 Last Active 12/11/18				
Nur	mber Street City State Zip Code o incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:				
	Check if this claim is for a community	☐ Student loans					
deb Is t	ot he claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims					
	No	\square Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Automobile					
'	SDOE/GLELSI npriority Creditor's Name	Last 4 digits of account number	8581	\$87,972.00			
Att Po	tn: Bankruptcy D Box 7860 adison, WI 53707	When was the debt incurred?	Opened 08/10 Last Active 7/01/13				
Nur	mber Street City State Zip Code io incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:				
	Check if this claim is for a community	 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims 					
	he claim subject to offset?						
	No	☐ Debts to pension or profit-sharin	ring plans, and other similar debts				
	Yes	☐ Other. Specify					

Educational

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 7 of 8

Case number (if known)

- you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts
- Other. Add all other nonpriority unsecured claims. Write that amount
- Total Nonpriority. Add lines 6f through 6i.

6h.	\$ 0.00
6i.	\$ 26,057.00

189,599.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Jonathan Michae	l Gabbard		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	OF NEW YORK	
Case number				Chook if this is an
(ii kilowii)				Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
	•				

	s information to identify your	case:			
Debtor 1	Jonathan Michae	I Gabbard Middle Name	Last Name		
Debtor 2					
(Spouse if, fi	ling) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	WESTERN DISTRICT (OF NEW YORK		
Case num	nber				
(if known)					Check if this is an amended filing
	al Form 106H	a la tara			
scne	dule H: Your Cod	eptors			12/15
	e and case number (if known) you have any codebtors? (If y			e as a codebtor.	
■ No					
	thin the last 8 years, have you na, California, Idaho, Louisiana,				
`	o. Go to line 3.				
⊔ Ye	es. Did your spouse, former spou	ıse, or legal equivalent live	e with you at the time?		
in lin Form	e 2 again as a codebtor only it	f that person is a guaran	tor or cosigner. Make	sure you have listed t 06G). Use Schedule D,	ng with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fil editor to whom you owe the debt
	Name, Number, Street, City, State and ZI	P Code		Check all schedule	
3.1	Name			☐ Schedule D, lin☐ Schedule E/F,☐ Schedule G, lin	line
	Number Street City	State	ZIP Code	_	
3.2	Name			□ Schedule D, lin □ Schedule E/F,	
				☐ Schedule G, lir	
	Number Street				
	City	State	ZIP Code		

Fill	in this information to identify	your case:							
Deb	otor 1 Jonath	an Michael Gabbard			_				
	otor 2 use, if filing)				_				
Uni	ted States Bankruptcy Court	for the: WESTERN DISTRICT	Γ OF NEW YORK		_				
	se number 		-			Check if this is An amende A supplement 13 income	ed filing ent showing	g postpetition ollowing date:	
O	fficial Form 106I					MM / DD/ Y	YYY		
S	chedule I: Your	Income							12/15
sup	plying correct information. use. If you are separated ar ch a separate sheet to this	s possible. If two married peo If you are married and not filin nd your spouse is not filing wi form. On the top of any additi ment	ng jointly, and your ith you, do not inclu	spòuse i ide inforr	s livi natio	ng with you, incl on about your sp	ude inforn ouse. If mo	nation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	2 or non-fi	ling spouse	
	If you have more than one j		■ Employed			■ Empl	■ Employed		
	attach a separate page with information about additiona		☐ Not employed	☐ Not employed		☐ Not e	☐ Not employed		
	employers.	Occupation				Social	Worker		
	Include part-time, seasonal self-employed work.	Employer's name				Univers Cen	sity of Ro	chester Me	edical
	Occupation may include stu or homemaker, if it applies.	Employer's address					. Henriet ster, NY 1		
		How long employed the	here?				Years		
Par	t 2: Give Details About	ut Monthly Income							
	mate monthly income as of use unless you are separated	the date you file this form. If y	you have nothing to r	eport for	any li	ine, write \$0 in the	space. Inc	clude your nor	n-filing
,	u or your non-filing spouse ha e space, attach a separate sh	ave more than one employer, co	ombine the informatio	n for all e	emplo	yers for that perso	on the li	nes below. If y	you need
						For Debtor 1		otor 2 or ng spouse	
2.		s, salary, and commissions (bonthly, calculate what the monthle		2.	\$	0.00	\$	4,822.42	
3.	Estimate and list monthly	overtime pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income.	Add line 2 + line 3.		4.	\$	0.00	\$	4,822.42	

				For	Debtor 1	For Deb	otor 2 or	
							ng spouse	
	Copy	y line 4 here	4.	\$	0.00	\$	4,822.42	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	646.76	i
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	144.67	-
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	_
	5e.	Insurance	5e.	\$	0.00	\$	645.17	_
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	_
	5g.	Union dues	5g.	\$	0.00	\$	0.00	_
	5h.	Other deductions. Specify:	5h.+	· · · —		+ \$	0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	1,436.60	_
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	3,385.82	_
8.	List	all other income regularly received:						
	8a.	Net income from rental property and from operating a business, profession, or farm						
		Attach a statement for each property and business showing gross						
		receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	0.00	1
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent		· 		· 		_
		regularly receive						
		Include alimony, spousal support, child support, maintenance, divorce						
		settlement, and property settlement.	8c.	\$	0.00	\$	0.00	_
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	_
	8e.	Social Security	8e.	\$	0.00	\$	0.00	_
	8f.	Other government assistance that you regularly receive						
		Include cash assistance and the value (if known) of any non-cash assistance	:					
		that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.						
		Specify:	8f.	\$	0.00	\$	0.00	1
	8g.	Pension or retirement income	_ 8g.	\$	0.00	\$	0.00	_
	8h.	Other monthly income. Specify:	8h.+	· -	0.00	*	0.00	_
	····				0.00		0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.0	0
10.	Calc	ulate monthly income. Add line 7 + line 9.	10. \$		0.00 + \$	3,385.	82 = \$	3,385.82
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				-,	_ -	-,
11		e all other regular contributions to the expenses that you list in Schedule	, –					
11.		de contributions from an unmarried partner, members of your household, your	-	dente	vour roommates	e and		
		r friends or relatives.	асрен	donto,	your roommatos	, and		
		ot include any amounts already included in lines 2-10 or amounts that are not	availab	le to pa	ay expenses list	ed in Sche	dule J.	
	Spec	sify:				,	11. + \$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The res						
		e that amount on the Summary of Schedules and Statistical Summary of Certain	in Liabi	<i>lities</i> a	nd Related <i>Dat</i> a		12. \$	3,385.82
	appli	es					^{12.} ^φ —	3,303.02
							Combi	ned
	_		_				month	ly income
13.	Do y	You expect an increase or decrease within the year after you file this form? No.	?					
		Yes. Explain: Debtor currently looking for employment						
		Deplor currently looking for employment						

	n this informa	tion to identify yo	our coco:			1			
						.			
Debt	Jonathan Michael Gabbard						Check if this is: An amended filing		
Debt (Spo	or 2 use, if filing)						A supplement show	ving postpetition chapter the following date:	
Unite	ed States Bankr	uptcy Court for the	: WESTE	ERN DISTRICT OF NEW Y	ORK	1	MM / DD / YYYY		
	e number nown)								
		rm 106J							
		J: Your						12/15	
info	rmation. If m		eded, atta	If two married people ar ch another sheet to this n.					
Part		ibe Your House	hold						
1.	Is this a join No. Go to								
			in a separ	ate household?					
	□ No □ Yo		st file Offici	al Form 106J-2, <i>Expense</i> s	for Separate House	ehold of Debto	or 2.		
2.	Do you have	e dependents?	□ No						
	Do not list De Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?	
	Do not state	the						□ No	
	dependents	names.			Son		1	■ Yes □ No	
					Daughter		2	■ Yes	
								□ No	
					Stepdaughter		15	Yes	
								□ No □ Yes	
3.	expenses of	enses include f people other t d your depende	han 👝	No Yes				— 103	
Part		ate Your Ongoi							
exp				uptcy filing date unless y y is filed. If this is a supp					
				government assistance i					
	value of such icial Form 10		d have ind	Eluded it on Schedule I: Y	our Income		Your expe	enses	
4.		or home owners and any rent for the		ses for your residence. In	nclude first mortgage	e 4. \$		1,200.00	
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a. \$		0.00	
	•	rty, homeowner's	-			4b. \$		0.00	
				upkeep expenses		4c. \$		20.00	
5.		owner's associat		oominium dues our residence, such as ho	me equity loans	4d. \$ 5. \$	-	0.00	

Official Form 106J

Case 2-19-21248-PRW, Doc 1, Filed 12/18/19, Entered 12/18/19 14:19:27, Description: Main Document, Page 31 of 51

Fill in this	information to identify your	case:			
Debtor 1	Jonathan Michae				
Debtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	WESTERN DISTRICT (OF NEW YORK		
Case numl	ber				☐ Check if this is an
(amended filing
btaining r		n connection with a banl			tement, concealing property, or 000, or imprisonment for up to 20
	ou pay or agree to pay some	one who is NOT an attor	ney to help you fill out bar	nkruptcy forms?	
_				Attach Do	nterentary Datition Propagator's Nation
Ц	Yes. Name of person				nkruptcy Petition Preparer's Notice, on, and Signature (Official Form 119)
that th	r penalty of perjury, I declare ney are true and correct. s/ Jonathan Michael Gabb		mary and schedules filed	with this declarat	ion and
J	onathan Michael Gabbard ignature of Debtor 1		Signature of De	ebtor 2	
D	ate December 18, 2019		Date		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Debtor 1	Jonathan Michael Gabbard					
	First Name Middle Name Last Name					
Debtor 2 (Spouse if, filing)	First Name	Middle Name WESTERN DISTRICT OF NEW	Last Name YORK			
United States B	Sankruptcy Court for the:					
Case number						
(if known)					heck if this is an	
				а	mended filing	
Official E	orm 107					
Official Fo		Affaire for Individual	s Eiling for Bankruntov			4/1
Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally respon.					<u> </u>	
nformation. If	more space is needed, a	attach a separate sheet to this fo	ng together, both are equally responsit orm. On the top of any additional pages			ļ.
umber (if know	wn). Answer every ques	tion.				
Part 1: Give	Details About Your Mar	ital Status and Where You Lived	l Before			
. What is yo	our current marital status	s?				
■ Marrie	2d					
□ Not m						
. During the	e last 3 years, have you l	ived anywhere other than where	you live now?			
□ No	•	•				
□ NO	Cart all art disabilities as a constitution of	red in the last 2 years. Do not inclu	ude where you live now.			
Yes. L	∟ist all of the places you li\	red in the last 3 years. Do not inch				
	List all of the places you live. Prior Address:	Dates Debtor 1	Debtor 2 Prior Address:		Dates Debtor 2	<u>!</u>
Debtor 1 I	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Address:		lived there	
Debtor 1 I	, ,	Dates Debtor 1	Debtor 2 Prior Address: ☐ Same as Debtor 1			
130 Gree Rochest	Prior Address: enleaf Medows er, NY 14612 88 Dewey Avenue	Dates Debtor 1 lived there From-To: 08/2018-05/2019 From-To:	_		lived there ☐ Same as Debt From-To: ☐ Same as Debt	or 1
130 Gree Rochest	Prior Address: enleaf Medows er, NY 14612	Dates Debtor 1 lived there From-To: 08/2018-05/2019	☐ Same as Debtor 1		lived there ☐ Same as Debt From-To:	or 1
Debtor 1 I 130 Gree Rocheste 4686-468 Rocheste	Prior Address: enleaf Medows er, NY 14612 88 Dewey Avenue er, NY 14612 E 74th Street	Dates Debtor 1 lived there From-To: 08/2018-05/2019 From-To: 06/2017-08/2018 From-To:	☐ Same as Debtor 1		lived there ☐ Same as Debt From-To: ☐ Same as Debt From-To: ☐ Same as Debt	or 1
Debtor 1 I 130 Gree Rocheste 4686-468 Rocheste	Prior Address: enleaf Medows er, NY 14612 38 Dewey Avenue er, NY 14612	Dates Debtor 1 lived there From-To: 08/2018-05/2019 From-To: 06/2017-08/2018	☐ Same as Debtor 1 ☐ Same as Debtor 1		lived there ☐ Same as Debt From-To: ☐ Same as Debt From-To:	or 1
Debtor 1 I 130 Gree Rocheste 4686-468 Rocheste	Prior Address: enleaf Medows er, NY 14612 88 Dewey Avenue er, NY 14612 E 74th Street	Dates Debtor 1 lived there From-To: 08/2018-05/2019 From-To: 06/2017-08/2018 From-To:	☐ Same as Debtor 1 ☐ Same as Debtor 1		lived there ☐ Same as Debt From-To: ☐ Same as Debt From-To: ☐ Same as Debt	or 1
130 Gree Rocheste 4686-468 Rocheste 12924 SE Oklahom	Prior Address: enleaf Medows er, NY 14612 B8 Dewey Avenue er, NY 14612 E 74th Street na City, OK 73150	Dates Debtor 1 lived there From-To: 08/2018-05/2019 From-To: 06/2017-08/2018 From-To: 06/2016-06/2017	☐ Same as Debtor 1 ☐ Same as Debtor 1	or territory	lived there ☐ Same as Debt From-To: ☐ Same as Debt From-To: ☐ Same as Debt From-To:	or 1

Case number (if known)

Official Form 107

Debtor 1

Jonathan Michael Gabbard

Best Case Bankruptcy

Case number (if known)

Debtor 1

Jonathan Michael Gabbard

Case number (if known)

Official Form 107

Debtor 1 Jonathan Michael Gabbard

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Best Case Bankruptcy

Pa	Identify Property You Hold o	r Control for	Someone Else				
23.	. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.						
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and	ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	escribe the property	Value	
Pa	art 10: Give Details About Environm	nental Informa	ation				
or	r the purpose of Part 10, the followin	g definitions	apply:				
	Environmental law means any fede toxic substances, wastes, or mate regulations controlling the cleanu	rial into the a	ir, land, soil, surface water, grour	_	• •		
	Site means any location, facility, o to own, operate, or utilize it, include		-	l law	, whether you now own, operate,	or utilize it or used	
	Hazardous material means anythir hazardous material, pollutant, con	ıg an environ	mental law defines as a hazardou	us wa	aste, hazardous substance, toxic	substance,	
Rep	port all notices, releases, and proce	edings that yo	ou know about, regardless of who	en the	ey occurred.		
24.	Has any governmental unit notified	d you that you	u may be liable or potentially liab	le un	der or in violation of an environm	ental law?	
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and S	ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice	
25.	Have you notified any government	al unit of any	release of hazardous material?				
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and 2	ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	ınd	Environmental law, if you know it	Date of notice	
26.	Have you been a party in any judic	ial or adminis	strative proceeding under any en	viron	mental law? Include settlements	and orders.	
	■ No □ Yes. Fill in the details.						
	Case Title Case Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ature of the case	Status of the case	
Pa	art 11: Give Details About Your Bus	iness or Con	nections to Any Business				
27.	Within 4 years before you filed for	bankruptcy, o	did you own a business or have a	any o	f the following connections to an	y business?	
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
	☐ A partner in a partnership						
	☐ An owner of at least 5% of the voting or equity securities of a corporation						

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

	No. None of the above applies. Go to Part 12.				
28.	☐ Yes. Check all that apply above and fill	in the details below for each business.			
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed		
	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.				
	■ No □ Yes. Fill in the details below.				
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued			

Debtor '	Jonathan Michael Gabbard		Case number (if known)
Part 12:	Sign Below		
Part 12.	Sign Below		
are true with a ba		ng a false statement, concealing pr	ents, and I declare under penalty of perjury that the answers operty, or obtaining money or property by fraud in connection up to 20 years, or both.
/s/ Jon	athan Michael Gabbard		
	nan Michael Gabbard Ire of Debtor 1	Signature of Debtor 2	
Date	December 18, 2019	Date	
•	attach additional pages to Your Sta	tement of Financial Affairs for Indiv	iduals Filing for Bankruptcy (Official Form 107)?
■ No □ Yes			
Did vou	pay or agree to pay someone who i	s not an attorney to help you fill out	bankruptcy forms?
■ No	,,		and appropriate the second sec

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this infor	mation to identify your	case:		
Debtor 1	Jonathan Michael	Gabbard		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTR	RICT OF NEW YORK	
Cana awahaa				
Case number _ (if known)				Check if this is an amended filing
Official Fo		n for Indiv	riduals Filing Under Chapt	ter 7 12/15
creditors have you have least You must file this	ever is earlier, unless th	ur property, or nd the lease has n ithin 30 days after		
	eople are filing together nd date the form.	in a joint case, bo	th are equally responsible for supplying correct	information. Both debtors must
	and accurate as possib our name and case num		s needed, attach a separate sheet to this form. O	n the top of any additional pages,
Part 1: List Y	our Creditors Who Have	Secured Claims		
For any credit information be		art 1 of Schedule D	: Creditors Who Have Claims Secured by Prope	rty (Official Form 106D), fill in the
	reditor and the property the	nat is collateral	What do you intend to do with the property th secures a debt?	at Did you claim the property as exempt on Schedule C?
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	2 No
			☐ Retain the property and enter into a	☐ Yes
Description of property	Ī		Reaffirmation Agreement.	
securing debt	:		☐ Retain the property and [explain]:	
Creditor's			☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	LI NO
			☐ Retain the property and redeem it.	☐ Yes
Description of	f		Reaffirmation Agreement.	
property securing debt	:		☐ Retain the property and [explain]:	
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	<u> </u>
Description of	f		☐ Retain the property and enter into a	☐ Yes
property			Reaffirmation Agreement.	

Creditor's

securing debt:

Statement of Intention for Individuals Filing Under Chapter 7

 \square Surrender the property.

page 1

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Best Case Bankruptcy

☐ No

Debtor 1 Jonathan Michael Gabbard	Case number (if known	7)
name: Description of	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. 	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	_
Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in the information below. Do not list real estate leases. Un you may assume an unexpired personal property lease if	I in Schedule G: Executory Contracts and Unexpir nexpired leases are leases that are still in effect; the	ne lease period has not yet ended.
Describe your unexpired personal property leases		Will the lease be assumed?
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Part 3: Sign Below		
Under penalty of perjury, I declare that I have indicated m	y intention about any property of my estate that s	ecures a debt and any personal
oroperty that is subject to an unexpired lease. X /s/ Jonathan Michael Gabbard	X	
Jonathan Michael Gabbard Signature of Debtor 1	Signature of Debtor 2	
Date December 18, 2019	Date	

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Best Case Bankruptcy

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Cł	napter 7:	Liquidation	
	\$245	filing fee	
	\$75	administrative fee	
<u>+</u> _	\$15	trustee surcharge	
	\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Best Case Bankruptcy

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/Resources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Western District of New York

Disclosure of compensation to be paid to me was: The source of compensation to be paid to me is: Debtor Other (specify):	In re	Jonathan Michael Gabbard		Case No.		
Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept \$ 0.00 Balance Due \$ 0.00 Balance Due \$ 0.00 S 0.00 of the filing of this statement I have received \$ 0.00 Balance Due \$ 0.00 The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: The source of compensation to be paid to me is: The source of compensation to be paid to me is: The relative of the above-disclosed compensation with any other person unless they are members and associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Lecrify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. December 18, 2019 Date Michael A. Furlano			Debtor(s)	Chapter	7	
compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services. I have agreed to accept Prior to the filing of this statement I have received Balance Due S 0.00 Balance Due S 0.00 Of the filing fee has been paid. The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] The gareement with the debtor(s), the above-disclosed fee does not include the following service: Representation in Reaffirmation Hearings CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. December 18, 2019 Michael A. Furlano Michael A. Furlano Michael A. Furlano Signature of Automey Legal Aid Society 1 West Main Street Suite 800 Rochester, NY 14614 (585) 232-24909 Fax: (585) 232-2352		DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR D	EBTOR(S)	
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Name of law firm					52	
			Name of law firm			

United States Bankruptcy Court Western District of New York

In re	Jonathan Michael Gabbard		Case No.	
		Debtor(s)	Chapter	7
	VERIFI	CATION OF CREDITOR	R MATRIX	
The ab	ove-named Debtor hereby verifies that	the attached list of creditors is true and	correct to the best	of his/her knowledge.
Date:	December 18, 2019	/s/ Jonathan Michael Gabbard Jonathan Michael Gabbard Signature of Debtor	rd	

United States Trustee 100 State Street Room 6090 Rochester, NY 14614

Hon. Paul R. Warren 100 State Street Rochester, NY 14614

AT&T Wireless P.O. Box 537104 Atlanta, GA 30353

Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850

Citibank/Best Buy Attn: Bankruptcy Po Box 790441 St. Louis, MO 63179

Eos Cca Attn: Bankruptcy Po Box 329 Norwell, MA 02061

Investors Property Management 1161 Sonoma Park Drive Suite 400 Norman, OK 73071

Kavod Psychotherapy 25 Circle Street Unit 201 Rochester, NY 14607

Kohls/Capital One Attn: Credit Administrator Po Box 3043 Milwaukee, WI 53201 Mercantile Adjustment Bureau Attn: Bankruptcy 165 Lawrence Bell Dr Ste 100 Williamsville, NY 14221

OKDHS
Attn: Bankruptcy
Po Box 248822
Oklahoma City, OK 73124

Rochester Gas & Electric Corp. 89 East Avenue Rochester, NY 14649

Rochester Regional Health P.O. Box 26290 Rochester, NY 14626-0290

Solomon & Solomon P C Attn: Bankruptcy 1 Columbia Circle Albany, NY 12203

The University Of Oklahoma 1000 Asp Avenue Norman, OK 73019

USAA Federal Savings Bank Attn: Bankruptcy 10750 Mcdermott Freeway San Antonio, TX 78288

USDOE/GLELSI Attn: Bankruptcy Po Box 7860 Madison, WI 53707

Wells Fargo Financial Attn: Bankruptcy Po Box 10438 Mac F8235-02f Des Moines, IA 50306